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Lessons learned: What has the pandemic taught us about long-term care for seniors?

Greater investment in Saskatchewan's public long-term care system is desperately needed, says Tracy Zambory, president of the Saskatchewan Union of Nurses.

Pat Rediger • Postmedia Content Works
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Seniors, particularly those in long-term care, are the most at-risk population for COVID-19. Tracy Zambory, president of the Saskatchewan Union of Nurses, is calling for greater investment in Saskatchewan's public long-term care system. PHOTO BY GETTY

It is no secret the pandemic has highlighted the systematic challenges for seniors and long-term care facilities in Canada. Saskatchewan has fared relatively well, but the Saskatchewan Union of Nurses (SUN) points out there are lessons the province can learn from harder-hit jurisdictions where COVID-19's impact has been far more tragic.

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“The pandemic has shown how essential—and sometimes underappreciated—our long-term care health care providers are. The current system, which is plagued by chronic understaffing, heavily relies on families, informal caregivers, and volunteers to compensate for the insufficient resources,” said SUN president Tracy Zambory.

Seniors, particularly those in long-term care, are the most at-risk population for COVID-19. More than three quarters of Canada’s deaths from the virus have been among long-term care residents.

Even facilities not experiencing outbreaks are affected by the pandemic. Necessary safety precautions, such as restrictions on activities and visitors, have taken a toll on residents’ psychological and emotional well-being.

Most long-term care facilities in the province are operated by and bound to the Saskatchewan Health Authority. This system has helped ensure more consistent standards of care in Saskatchewan, as compared to provinces with higher percentages of for-profit long-term care homes. PHOTO: GETTY

Saskatchewan has coped relatively well with COVID-19. Most long-term care facilities in the province are operated by and bound to the single public health authority.

Zambory said that having a fairly integrated public health system is advantageous in these types of situations, ensuring more consistent standards of care.
"Our province's geographical location and lower population density is also on our side. It gave the Health Authority more time to put measures in place. The people of Saskatchewan have also taken those measures seriously, keeping case numbers relatively low," explained Zambory. "The impact of the virus on seniors is interlaced with community transmission. If the public keeps following safety precautions then that will help keep the most vulnerable protected."

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She cautioned, however, that the public system in Saskatchewan is unfortunately not as strong as it could be.

"Care standards and physical infrastructure are being increasingly neglected, while the private care industry is being encouraged and subsidized to pick up the slack, shifting costs onto individual seniors and families," said Zambory.

The pandemic has called the trend towards privatization of long-term care in Canada into question. Ontario, which has one of the highest percentages of for-profit long-term care homes in the country, has also seen the highest COVID-19 fatalities and mortality rates occur in these facilities.

"When you prioritize profits over people, the quality of care suffers. Lower staffing levels, higher rates of hospitalization for residents, and even higher mortality rates are the inevitable outcomes of running long-term care like a business," said Zambory. "What we have witnessed in Ontario is an important lesson for Saskatchewan and a wakeup call for the rest of Canada to eliminate for-profit from long-term care. It is clearly compromising the safety of our country's seniors."

Zambory added that greater investment in Saskatchewan's public long-term care system is desperately needed, noting the current approach is affecting the rest of the health care system. Many hospital beds are given to "Alternate Level of Care" patients who are waiting for a long-term care placement. This is increasing waiting times in our emergency rooms and is a difficult environment for the fragile elderly.

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Insufficient staffing of long-term health care facilities in Saskatchewan is a serious concern for the Saskatchewan Union of Nurses. A stable and adequate work force helps ensure consistent, high quality care for those patients requiring long-term care.

PHOTO BY GETTY

Staffing is another area of concern stated Zambory. In the early days of the pandemic, there was a public health order that mandated the cohorting of staff—requiring staff to work only in one facility to reduce the chances of staff spreading the virus between facilities.

“This was the right thing to do, but raises the question: why are so many people who work in long-term care forced to cobble together a living by working at multiple facilities?” said Zambory. “We’ve known for years that a stable workforce benefits patients, providing for continuity of care, and a consistent care team for families and physicians can collaborate with. Now, because of COVID-19, we also know that consistency for workers is also important for infection control.”

After the death of Regina long-term care resident Margaret Warholm in 2013, investigations revealed systemic issues in the sector. In 2016, the provincial auditor recommended the Ministry of Health consult with the then-12 health regions and stakeholders to map out the care needs of current and future residents. The auditor also urged the government to identify and report on the factors that affect quality of care, and recommended that government develop and make public a strategy to address those needs. Zambory said that hasn’t happened yet.

Zambory said she believed this conversation needs to be expanded to a national level: “We need consistent standards applied to all Canadian jurisdictions according to the principles of the Canada Health Act. There also needs to be targeted federal funding, and evidence-based, mandatory safe staffing models. This is how equitable standards of care will be maintained.”

The more the public understands the needs in long-term care, the more demand there will be on decision makers to properly address these needs, said Zambory. “It is easy for those of us who do not currently experience or depend on this system to look away. If any good comes out of the pandemic, it will be a new sense of how connected we are. It will lead us to re-evaluate our priorities when it comes to seniors’ care.”

For more information, go to *makingthedifference.ca*.

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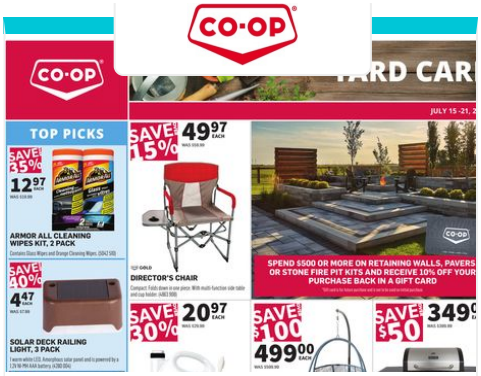

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